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DSS and Accommodations in Higher Education: Perceptions of Students with Psychological Disabilities

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Abstract

The number of individuals with psychological disabilities attending colleges and universities has increased steadily over the last decade. However, students with psychological disabilities are less likely to complete their college programs than their non-disabled peers and peers with other types of disabilities. This qualitative study explored how college students with psychological disabilities utilize assistance provided by Disability Support Services (DSS), including accommodations, in order to reach their postsecondary goals and examined how these students perceived and described the impact of these services. The researcher conducted in-depth interviews with 16 participants and utilized grounded theory research methods to collect and analyze data. Various themes emerged from the study, including benefits and challenges of using accommodations, the role of DSS on participants' academic experiences, and issues regarding disclosure and stigma.

Keywords: Postsecondary education, postsecondary transition, psychological disabilities, accommodations, higher education

Over the last decade, the number of postsecondary students with psychological disabilities (PD)[1] has steadily increased (Cleary, Walter, & Jackson, 2011; Collins & Mowbray, 2008; Gallagher, 2009). Exact percentages of individuals with PD attending postsecondary institutions are not known (Belch, 2011; Cleary et al., 2011). However, there is much evidence indicating the growing number college students with PD (Belch, 2011; Cleary et al., 2011; Collins & Mowbray, 2008; Newman, Wagner, Cameto, Knokey, & Shaver, 2010; Sharpe, Bruininks, Blacklock, Benson, & Johnson, 2004). Furthermore, the prevalence rate of students with psychological disabilities (SWPD) attending institutes of higher education is beginning to surpass those of learning disability and attention deficit disorder combined (Kiuhara & Heufner, 2008; Sharpe et al., 2004). Anecdotal evidence also suggests an increase in the number of SWPD seeking and receiving services from university disability service support (DSS) providers in higher education (Preece, Beecher, Martinelli, & Roberts, 2005). Moreover, Gallagher (2004) found 90.6% of college counseling directors are concerned with the increasing prevalence of college students with serious psychological disorders.

Attending college and working towards academic goals is challenging for most students, with or without a disability. In addition to the typical demands of increased academic rigor, new social situations, and living away from home for the first time, attending a postsecondary institution involves further challenges for individuals with psychological disabilities. These include monitoring and managing symptoms of their disability in new and unfamiliar situations, both academic and social; determining to whom they should disclose their disability; deciding if they are going to seek assistance, and if so, what types of assistance; and

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[1] For the purposes of this study, the term "psychological disabilities" refers to "a health condition characterized by alteration in thinking, mood, or behavior, or a combination of all three linked to distress and/or impaired functioning in a person" (Mental Health: A Report of the Surgeon General, 1999). The term "psychological disabilities" will be utilized throughout the study, unless another expression appears within a quoted text or is used within a specific context or framework.

figuring out how to obtain these supports. Furthermore, students who receive services from a therapist or psychiatrist may not have access to the same providers if they have relocated to attend school. They also have less immediate access to other support systems, such as family members and friends. Finally, they must contend with stigma and misinformation regarding mental illness, perhaps the most difficult and pervasive challenge (Blacklock, Benson, & Johnson, 2003; Stein, 2012).

Although appropriate supports and treatment can help assist SWPD achieve their postsecondary educational goals (Collins & Mowbray, 2005), this population poses new challenges to administrators and faculty who are not familiar with their needs (Belch, 2011). Psychological disabilities are the least understood and least academically supported disability at institutes of higher education (Belch, 2011; Megivern, Pellerito, & Mowbray, 2003). Not surprisingly, SWPD are often unsuccessful in their academic pursuits (Unger & Pardee, 2002), and these students have consistently completed their programs of study at a lower rate than their non-disabled peers (Best, Still, & Cameron, 2008; Newman et al., (2010). According to Salzer (2012), 86% of students with psychological disabilities withdraw from their postsecondary programs compared to 45% of the general population. Despite the increase of students with psychological disabilities attending postsecondary institutions, they are enrolling at a lower rate than peers with other disabilities, with 34% enrollment for students with psychological disabilities versus 78% enrollment of individuals with visual impairments, 72% of individuals with hearing impairments, 58% of individuals with autism, and 47% of individuals with learning disabilities (Newman et al., 2010).

Disability support service providers report they are "often challenged in meeting the needs of students with psychiatric disabilities" (Sharpe et al., 2004, p.1) due to the complex problems individuals with psychological disabilities face, such as academic failure, withdrawal, and social isolation (Blacklock et al., 2003). In order to respond to the needs of SWPD, postsecondary institutions offer a variety of services, such as university based counseling, outpatient therapy, medication, and academic accommodations. The intent of academic accommodations and DSS is to address the functional limitations (e.g., difficulty managing time and deadlines, extreme reactions to negative feedback, difficulty with concentration) a student is experiencing, thereby reducing the effects of an individual's disabling impairment (Shaw & Dukes, 2005). Because services are provided based on functional limitations, the accommodations for SWPD are often similar or identical to supports for students with other disabilities, such as extended time and separate rooms for testing, note-taking, tape recording of lectures, and flexibility regarding attendance (Sharpe et al., 2004). Furthermore, specific and appropriate accommodations are not as evident for individuals with psychiatric disabilities (Blacklock, et al., 2003). According to Hamblet (2009), providing supports and accommodations to this population can be "tricky" because symptoms vary among individuals and "affect students differently at different times" (p. 6).

Currently, there is limited research to guide disability service providers in best assisting SWPD (Salzer, 2012; Sharpe et al., 2004). Salzer, Wick, and Rogers (2008) suggest "little is known about familiarity with and use of accommodations among students with mental illnesses...nothing is known about which accommodations are most used, which are perceived to be most helpful, and the barriers that students face in obtaining accommodations" (p. 371). In addition, few research studies have explored the perspectives and experiences of individuals with disabilities (Carter, Trainor, Ditchman, & Owens, 2011). It is important to understand the perspectives of individuals with psychological disabilities engaged in postsecondary activities, as supports and services must be based on the concerns and experiences of this population (Kurth & Mellard, 2006; Stein, 2012). The purpose of this study was two-fold: (1) to explore how college students with psychological disabilities utilize assistance provided by DSS, including accommodations, in order to reach their postsecondary educational goals; and (2) to explore how college students with psychological disabilities perceive and describe the impact of these services.

Methods

The researcher utilized grounded theory research methods and followed systematic methods of recruiting participants, data collection and data analysis, as delineated by Charmaz (2006). Grounded theory methods "consist of systematic, yet flexible guidelines for collecting and analyzing data to construct theories grounded in the data themselves" (Charmaz, 2006, p. 2). A study using grounded theory examines a process or action that occurs or develops over time, with the goal of developing a theory of the identified process (Creswell, 2013). According to Creswell (2013), a theory is "an explanation of something or an understanding that the researcher develops" (p. 85). He further notes the goal of grounded theory methods is not to develop a "grand" theory, but a "substantive" level theory (p. 290). That is, a "low-level theory applicable to immediate situations" (p. 290) emerging from the examination of a phenomenon situated in a specific context (Creswell, 2013; Strauss & Corbin, 1990). The researcher chose to utilize grounded theory methods because she is interested in the process of college students with psychological disabilities seeking and utilizing accommodations and other assistance provided by DSS to assist them in their postsecondary academic achievement.

Participants

The researcher used purposeful sampling procedures for this study. Specifically, participants were selected based on certain criteria, rather than convenience sampling methods, in which the researcher recruits participants based on availability or willingness to participate (Sandelowski, 1995). These specific criteria included the following: participants were registered with the DSS office at their university and were identified as having a psychological disability as either their primary or secondary disability; they were receiving accommodations through DSS, or other supports provided by DSS at the time of the study; and, they were currently enrolled in full time course work at their university, maintaining a 2.5 GPA or higher. This GPA was chosen as one of the criteria as it is a minimum requirement for many academic programs at this university. All participants were enrolled at a regional public university in the Mid-Atlantic area of the United States, which serves approximately 21,000 students.

The researcher worked with the university's DSS office to recruit participants. Specifically, the researcher developed a flyer describing the study, its purpose, what was involved in the study, and the researcher's contact information, which was then distributed to students registered with DSS and identified as having a psychological disability, as either a primary or secondary disability, by DSS staff. Interested students contacted the researcher, who explained the study in further detail, and answered questions from the potential participants. This initial phone conversation also served as a screening to confirm participant qualifications. Eighteen of the 22 students who contacted the researcher met the criteria. The researcher explained the study in further detail, answered participants' questions, and began to establish rapport during the phone conversation; appointments were scheduled during the phone screening. Sixteen of the 18 students attended the scheduled appointment. Two decided not to participate and contacted the researcher to cancel their interview. Participants were undergraduate students, including one freshman, two sophomores, seven juniors, and six seniors. One student was earning a second bachelor's degree. Ages ranged from 19 to 34, with a mean age of 24.25. The majority (n=13) of participants were female; 14 were Caucasian, and two African-American. A variety of majors were represented; three students were double majors and two were undecided. Of the 16 participants, four had IEPs in elementary, middle, or high school, and three additional participants received accommodations through a Section 504 plan. Four students attended small private schools because they needed "extra help," and received accommodations without an IEP or Section 504 plan. Psychological disabilities included panic disorder, anxiety, bipolar 1 and 2, non-specified mood disorder, major depressive disorder, obsessive compulsive disorder (OCD), agoraphobia, and post-traumatic stress disorder (PTSD). Several participants identified themselves as having multiple diagnoses, including non-psychological disabilities such as dyslexia, processing disorders, and ADHD. Anxiety and mood disorders were the most common disabilities represented. Demographic information is presented in Table 1.

Data Collection

Intensive interviews were conducted with each participant. This method of collection was chosen because intensive interviewing allows for an in-depth exploration of a particular topic or experience and thus is a useful method for interpretive inquiry (Charmaz, 2006). The researcher used an interview protocol (see Table 2); however, questions sometimes varied depending on the responses of the participant. Flexibility is important to allow for answers to be fully explored and to address topics in an order that is comfortable to the participant (Legard, Keegan, & Ward, 2003). The interviews ranged from 45 to 125 minutes, with the majority of interviews lasting between an hour and an hour and a half. Follow-up interviews, which allowed for member checking and theme verification,

Table 1

Description of Participants

Domain	Frequency	Percentage of Total
Gender		
Male	3	18.75
Female	13	81.25
Race/Ethnicity		
African American	2	12.5
Caucasian	14	87.5
Age		
19	1	6.25
20	2	12.5
21	3	18.75
22	2	12.5
24	1	6.25
25	1	6.25
26	1	6.25
27	1	6.25
28	1	6.25
29	1	6.25
30	1	6.25
34	1	6.25
College Year		
Freshman	1	6.25
Sophomore	2	12.5
Junior	7	43.75
Senior	6	37.5
Previous Services		
504	3	12.5
IEP	4	25
Private School Accommodations	4	25
Major Course of Study		
Education	3	18.75
Business	1	6.25
Journalism	1	6.25
Sports Management	1	6.25
Graphic Design	1	6.25
English	1	6.25

(Table 1, continued)

Biology	1	6.25
Family Studies	1	6.25
Religious Studies	1	6.25
Undecided	2	12.5
Dual Majors*	3	18.75
Diagnosis *(some participants have dual or multiple diagnoses)*		
Depression	7	43.75
Anxiety	7	43.75
Bipolar	3	18.75
Mood Disorder, NOS	2	12.5
Obsessive Compulsive Disorder	2	12.5
Attention Deficit Hyperactivity Disorder	2	12.5
Panic Disorder	1	6.25
Post-Traumatic Stress Disorder	1	6.25
Agoraphobia	1	6.25
Dyslexia	1	6.25

* Dual majors include Psychology and Animal Behavior, Psychology and Deaf Studies, and Music and English.

ranged from 10 to 35 minutes, and took place no later than two weeks after the initial interview. The duration for interviews varied depending on the participants' responses. Some of the variation may have been due to the range of participants' experiences. For example, the freshman and sophomores, as well as students who had recently registered with DSS, had less experience to draw from as compared to individuals who have received accommodations for several years. Face-to-face follow up interviews were conducted with seven participants and four interviews were conducted over the phone.

Consistent with grounded theory methods, the researcher collected data until saturation was reached (Strauss & Corbin, 1998). Theoretical saturation occurs when no new or relevant data seem to emerge regarding a category; the category is well developed in terms of its properties and dimensions demonstrating variation. Thus, the relationships among categories are well established and validated (Strauss & Corbin, 1998, p. 212). The researcher utilized a zigzag approach, going back and forth between data collection and analysis, until categories emerged and reached saturation (Creswell, 2013). It was determined saturation was reached at the fourteenth interview. The researcher confirmed this determination several times throughout the research process by revisiting the data continuously and considering whether data suggested new properties (Charmaz, 2006).

Participants were given a choice to meet in the DSS office, the researcher's office, or an alternate location where they felt comfortable. Ten met with the researcher in the DSS office, and six chose to meet in the researcher's office. During the phone screening and before the face-to-face interview began, the researcher worked towards establishing rapport with participants by engaging in neutral conversation. She also described her educational background and why she was interested in this particular topic. Although the researcher was not an instructor of any of the participants, nor did she know them before the interviews, some participants may have been nervous or anxious to provide "right" answers because the researcher was a professor at the university. For example, a couple of participants would ask, "Is that what you meant?"

Table 2

Interview Questions

Interviewee Background	
	How long have you been a student at this institution?
	What is your major?
	What are your career plans?
	When did you graduate high school?
	Did you attend a community college before attending this institution?
	When were you diagnosed with a psychological disability?
	Did you receive accommodations in elementary, middle or high school? If so, describe.
Accommodations	
	How long have you received accommodations from DSS?
	How did you learn about the services DSS offers?
	What accommodations do you currently receive? Describe how they help you.
	What accommodations have you received in the past? Describe how they helped you.
	Why aren't you receiving those accommodations now?
	Describe the impact of DSS on your experience at this institution.
	What accommodations would you like DSS to offer? Explain.
	Thinking about this topic, is there anything you would like to add?
Disclosure and Asking for Assistance	
	Do you ever want assistance but do not ask? Why? What factors do you consider?
	What is difficult about asking for or receiving assistance?
	Thinking about this topic, is there anything you would like to add?

after responding to a question. In order to address these concerns, the researcher stated that she was not looking for a particular response but was interested in their experiences. She stressed there were no right and wrong answers and their responses would not be connected directly to them. The researcher noted most participants appeared very eager to share their experiences and many expressed gratitude that they were given the opportunity to talk about the issues addressed in the interview.

As previously stated, the researcher conducted follow up interviews with 11 participants, seven in person and four on the phone. During these interviews, the researcher conducted the following steps:

1. The researcher shared selected segments of the participant's interview transcript representative of categories and themes that emerged from the data (if they preferred, the participants were given a hard copy of the transcript excerpts) and asked the following questions for each segment:
    a. When I asked about (question), you mentioned (read transcript). Does this sound like what you meant to say?
    b. Is there a way that I should modify the statement to reflect a more accurate portrayal of your experiences?
    c. Do you agree or disagree with this segment? Please explain.
2. After each segment was reviewed, the researcher asked participants if there were any other questions, or if there was anything they forgot to mention during the initial interview.

The follow up interviews allowed participants to add to their responses. No participants stated they disagreed with the transcripts presented, and the majority confirmed their responses with a simple affirmation or a brief explanation. Three participants expanded on their responses in more detail. However, no new themes or codes emerged from the follow up interviews, thus reinforcing the categories and relationships among the categories that emerged from the initial interviews.

Data Analysis

The researcher was guided by Charmaz' (2006) framework for grounded theory analysis, engaging in three levels of coding: open, focused, and theoretical. Coding allows the researcher to stop and consider analytic questions of the gathered data (Charmaz, 2006). Initial, or open, coding involves studying segments of data for "analytic import" (p. 42). The second major phase, focused coding, requires the researcher to select the most useful initial codes and test them against the data (p. 42). During the theoretical coding process, the researcher "weaves the fractured story back together" (Glaser, 1978, p. 72) by integrating the focused codes to form a coherent narrative. The researcher used N-VIVO 9 software throughout the coding process.

Results

Several core themes emerged from the participants' descriptions of their experiences of seeking and utilizing supports while they worked toward their academic goals. These include the benefits and challenges of using accommodations, the role of DSS on participants' academic experiences, and issues regarding disclosure and stigma.

Benefits and Challenges of Using Accommodations

According to the participants, accommodations help mitigate challenges related to their psychological disabilities, particularly for those who identified themselves as having anxiety or a mood disorder such as depression or bipolar. Specific challenges include the inability to focus or concentrate during class time, difficulty taking tests in a large group setting or within a set timeframe, and feeling anxious when attending certain classes. Many participants stated they did not ask for accommodations in every course but only when they felt they were needed for them to be successful. Most expressed they were "grateful" to have accommodations and other supports provided by DSS.

Participants received a variety of accommodations, including note taking, extended time and/or a distraction-free environment for testing, frequent breaks, access to notes/power points, preferential seating, excused absences when disability related, and priority registration. The two most frequently cited accommodations were testing accommodations (e.g., extended time, distraction free testing environment) and the use of a note taker or access to instructors' notes and power points. Overall, the participants described the accommodations as "helpful" and "necessary." However, they noted some challenges to receiving and using their accommodations.

Testing accommodations. Participants reported testing accommodations allowed them to concentrate and feel less anxious when taking exams. One student credited this accommodation as allowing her to be successful in her classes that required a lot of testing, "I would take the tests in the DSS office. That was very helpful. I would have never passed without the extended time." Another participant stated, "I would never be able to finish tests on time. I know the information, but have a lot of trouble focusing." However, difficulties arose when students had questions regarding the test and were not able to ask the professor because he or she was unavailable. Taking tests in a professor's office was also challenging, as the professors often made phone calls or had other students stopping by during office hours. According to one participant:

> Sometimes, I like extra time, but I like taking it with the class because I have questions and it is impossible to get a hold of the professor to ask questions [while taking the test]. In one class, I asked the professor if I could take it with class but with extra time, but he said no, I had to choose. Most let me have time if I take it with the class, but some don't.

"It's tough because you have to make a choice," stated another participant, "you need the quiet space but then you can't ask questions, and sometimes the directions or questions are confusing. I tried taking tests in a professor's office, but there were too many interruptions." Most participants stated they had to choose between the benefits of the testing accommodations or being able to ask the instructor questions regarding the test. The majority of the participants made this decision on a class-by-class basis.

Note taking accommodations. Almost all participants receive, or have received, a note taker or access to the instructor's power points or notes as an accommodation. Most participants stated this accommodation is beneficial because it is difficult for them to concentrate on information presented during class and take notes at the same time and they would not "know what is going on" without notes provided to them. In addition, symptoms of their psychological disability often interfere with their ability to take quality notes. As one participant described, "sometimes the depression affects how well I remember things and how I interact so having the notes really helps." According to another participant, "the note taking is absolutely key because I can't keep up and if I can't focus on class and understand what is going on I can use the notes [from the note taker] as a backup." The quality of the note taker is also important:

> There is definitely variation in the quality of notes, which makes a difference. In history, the guy was really organized and he typed everything. It was 16 pages long per day. It was amazing. I did so well in that class and a big part of it was the notes.

This accommodation, however, involves several challenges, including finding a note taker, receiving quality notes, and issues of confidentiality. Some participants reported not being able to get a note taker, particularly when the professor only announces the request once. An additional challenge was receiving notes once a note taker is assigned:

> In one class, the note taker never provided me with notes…it makes it hard because I need notes to be successful on tests; I can't concentrate and take notes at the same time…my English teacher wouldn't get me one and by the time she did it was too late…I was too far behind.

Another participant experienced the same frustration:

> The teacher said there was nothing he could do and was not very understanding about it. It's his job to get the note taker and make sure we get the notes because the note taker doesn't even have to know who we are. We got a new one but no notes yet. Not sure how well I'm going to do in that class.

Some find even when they do receive student notes, there are problems with the quality. As one student explained, "Rarely do I have problems getting one, but rarely do I have an excellent one." Some described their note takers as "inconsistent," "awful," and "disorganized." Also, the notes were sometimes difficult to read, "The note taker I had in the other English class was a terrible note taker. Wrote in cursive you couldn't read, she would show up late to class. It wasn't helpful." Also, some participants felt the note takers are not provided enough information regarding the note taking process, and therefore often do not follow through. According to one participant, "It's confusing for them; they don't know what to do. They don't know they get money, where to go to get a copy card…most professors don't even know." Many participants wished they were able to switch note takers if there was a problem or receive the instructor notes until they were comfortable asking a class mate to serve as their note taker, "Being able to switch would be great…it's [the quality of the notes] always better when I ask someone I've gotten to know." Indeed, participants seemed to find more success when they knew someone from a previous class or if they waited a few weeks until they were comfortable asking someone for notes. One student commented, "When I ask someone specifically, they are great and really follow through." One participant is in a cohort and takes her classes with the same students, "I'm really lucky because I found someone who takes great notes the first semester I was in a cohort, and she does it every semester."

Another issue regarding note taking involves the issue of confidentiality. Some professors announce the student's name or indicates who needs the notes in front of the entire class:

> I find it ironic they'll make an announcement in class, "An anonymous person needs a note taker, if you are willing to take notes stay after class," and then after class, a lot of students are still there and the instructor will say, "Oh [student name], here is your note taker." It can be embarrassing.

In fact, confidentiality was a frequently mentioned concern among participants regardless of the type of accommodations they received. As one student stated, "Confidentiality is definitely an issue… there is a stigma attached to a disability sometimes…and it's really no one's business." According to another student, "Anonymity is definitely an issue because of the…stigma." As a consequence, some participants stated they would often wait a few weeks to see if they felt they needed notes in a particular class before requesting a note taker.

Because of the challenges regarding note taking, participants made several suggestions for improvement, such as the professors being more proactive in securing a note taker, providing their power points to the student consistently, and adhering to the confidentiality policy. One participant suggested, "The professor could be more persistent, bring it up in class, follow up through email, etc. Because they need them, and every day that goes by without notes it's harder and harder." According to another participant:

> Actually getting a note taker would be great, the professors need to follow through more…it's understandable if they forget, but it's frustrating because you don't want to ask before class because then everyone knows. And professors tend to forget to be hush hush about it sometimes. I'm not necessarily that upset about it, because I deal with it… but in terms of other students, I can see that it can be upsetting or intimidating.

Most participants agreed having access to the instructor's power points or providing their notes would mitigate difficulties regarding note takers:

> I have access to power points most of the time, but sometimes it's an issue. I wish it was an accommodation. I got into an argument with one of the professors, he refused to send me his notes and power points but it is impossible to take notes in that class.

Another suggestion was for DSS to allow students "…the right to dismiss and find another note taker; if that was stated in writing, it's not as much of a break in contract."

Multiple and frequent breaks. In addition to testing and note taking accommodations, another frequently mentioned accommodation was the ability to leave class and take frequent breaks. Some participants experience panic attacks in class and being allowed to leave, or even knowing they can leave class without penalty, alleviates some of the pressure and anxiety. Many participants do not receive this as a formal accommodation, but find some professors are willing to work with them when they disclose the nature of their disability and ask for this additional accommodation. However, most would prefer it to be a "required" accommodation so they would not have to disclose their psychology disability to their professors or ask for "special treatment."

Suggestions for accommodations. The most common suggestion for additional accommodations not offered by their university was extended time on assignments. Most participants said they would not use this accommodation often, but only when the symptoms of their psychological disability prevented them from being able to concentrate. As one participant stated:

> If you are in a severely depressed period, you are not going to be able to do what you need to do. I understand the difficulty regarding the policy of needing a hard deadline, but extra time [on assignments] would be very helpful. Tests, too, if you are in a place when you can't concentrate, can't think, how well are you going to do?

According to another participant, "Depression…it eats energy. I have these times that I call dead; I have no energy and I just sleep." Several others mentioned the effects of medication, which makes them tired and unable to "think clearly."

Many participants described how the pressure of completing assignments became a "vicious cycle," as their anxiety makes it difficult to concentrate on assignments, which then causes them to be late or not complete the assignments in a timely manner, which increases their anxiety. Participants also described the difficulty of completing multiple assignments during a short period of time:

> If it wasn't three assignments due on the same day. If you can't concentrate the week of, and can't focus at home to do the work, and you don't feel confident to turn in the work you are capable of; having three deadlines on the same day makes you feel that much worse.

Some participants reported their professors work with them and provide extended time on assignments as an informal accommodation, but others do not. Therefore, they would like extensions for assignments to become a formal accommodation. As one participant stated, "If that was actually written down [as an accommodation] then the student themselves wouldn't feel so uncomfortable asking for that." Many stated just knowing they had that option, even if they did not use it, would alleviate some stress and anxiety.

Although participants described challenges to receiving accommodations, all agreed they helped them be successful in their course work. Most said they would not perform as well in their classes without their accommodations, and some stated they would have "failed out" or "given up" without the benefit of accommodations and the assistance provided by DSS.

The Impact of Disability Support Services

Participants reported DSS at their university has been integral not only to their academic achievement, but allowing them to stay in school. As one participant described:

> It does help knowing if I really do have an issue, I can be able to express that and be understood and not have it destroy my life because it's already affected my life thus far. It really is nice having it there.

Students learned of DSS through a variety of ways, including high school counselors, freshmen orientation, the university website, and course syllabi. Most participants registered with DSS their first semester of college. Those who waited stated they wish they sought accommodations sooner, and reported failing classes or having to withdrawal from classes. One participant who waited until her junior year to register with DSS stated:

> I have to say I wish I did this a lot earlier…freshmen or sophomore year…it's kind of a cyclical thing, each year had its bad points but some have been way worse than others. I think if I did this earlier, I would have been more successful early on.

Indeed, many participants stated they would not have been able to stay in school without the support provided from DSS. Typical comments included, "It's allowed me to stay in the program if I'm honest," and "It's definitely a big plus and I don't think I would be here if they weren't here."

The majority of participants identified additional supports, other than accommodations, offered by DSS that are beneficial and integral to their academic success. Supports include advising, intervening with professors when necessary, help with time management and organizational skills, a feeling of security knowing they have someone on campus who understands their challenges, guidance regarding how to handle challenges with courses, career counseling, goal setting, and guidance on when to withdraw from a course when necessary. For all participants, the most salient benefit of being registered with DSS and receiving services was the knowledge they had a support system and were not "out there all alone."

As previously discussed, many participants have had difficulty completing their assignments on time. Therefore, assistance with time management and organization is beneficial to most participants:

> DSS has made the workload I have to do a lot more manageable. It gives me a way to relate to another person when I feel overwhelmed with an assignment. Instead of procrastinating I can dive right in. It helps me tackle problems step by step with another person instead of looking at a stressful workload and getting overwhelmed.

Students meet with DSS staff not only for assistance with time management, but for advice and support throughout the semester. Specifically, participants reported receiving advice regarding what courses to take and how to handle challenges as they arrive. As one student observed, "You go to class prepared as best as you can be, assignment wise or mentally, but sometimes you fall short, so having that option, 'I need some help today,' that's really nice." Participants also perceive a difference in their interactions with professors when they present the DSS letter when asking for accommodations, "I can openly explain to teachers and have documentation, yes, I have a real disability and they can see that and then they make the accommodations."

Participants also appreciated the immediacy of services and the sense that the DSS staff cares about their success and well-being:

> I was able to get a meeting very quickly, within the week I emailed her I saw her. And she was very nice, and it surprised me how much that makes a difference but when you're nervous the person you are talking to being friendly and empathetic is really helpful…how they treated me when I walked in the door…that really helped me.

According to another participant, "It's good to know someone is there as a resource. Also, it's good that someone on campus knows I have a psychological issue so it's a support system."

The most common suggestion regarding DSS involved the notification process. At this university, DSS requires students to pick up a letter detailing their accommodations and present it to their professors. Some participants are satisfied with this process and feel it is beneficial to discuss their accommodations with the professors in person. One student summed up this perspective by saying, "I like giving them the letter and starting the conversation…I think the face to face interaction is good." In addition, some participants appreciate the flexibility of this process because they have the choice to request accommodations. Some stated there are classes in which they do not need accommodations and prefer not to disclose that they have a disability if it is not necessary. Others, however, would prefer a different method of notification:

> I feel like they should be notified from disability services, and possibly, I don't know, I think like they should have a meeting or something with faculty members because I feel like they're not fully aware of the student and what's going on.

Many participants agreed it would be beneficial for professors to be notified before the semester. According to one participant, "It would be helpful if the professor did know before the semester so they are prepared mentally, coming from a teacher's point of view." Some participants would like the DSS specialists to meet with the students and the professor. As one student said, "It would be good if all three people met, that way the specialist could answer questions the instructor had, and everyone would be on the same page." A few students suggested there should be meetings between academic advisors and their DSS advisor, as they sometimes receive conflicting information. Another suggestion was to have support groups for students with psychological disabilities, as it would be "helpful to know you're not the only one out there."

Disclosure and Stigma

Although participants were not asked directly about stigma, it was a recurrent theme throughout their interviews, particularly when asked about disclosing their disability and asking for accommodations. Many expressed discomfort having to ask for assistance, but did so because they knew receiving supports and accommodations were integral to their ability to achieve their postsecondary academic goals. Also, most participants asserted there is a greater amount of stigma attached to psychological disabilities and only disclose the nature of their disability when it is "absolutely necessary" or "obvious" they were struggling with anxiety or depression or other psychological symptoms. Furthermore, most participants described stigma as a pervasive problem and felt most people held misconceptions or negative attitudes regarding psychological disabilities. One student spoke for many other participants by saying, "There are so many misperceptions about it…the media only portrays the extreme."

Most participants stated they did not reveal the nature of their disability out of concern of stigma and that professors would "think less" of them. A typical comment about this perspective came from a student who said, "As far as professors, there isn't anyone I can think of that I would want to talk to about it. I've had it used against me. I don't like to tell people unless it's absolutely necessary." As previously mentioned, those who did disclose they have a psychological disability only did so when their symptoms were evident or interfered with their ability to meet course expectations. For all, the hesitancy again stemmed from concern regarding stigma. "If someone doesn't understand they can treat you differently and it's not fun." Another participant reports he is discouraged from disclosing because "I think I'm going to be treated differently because of it…there are times I purposefully leave out what I have because I'm afraid of being discriminated against." Some felt their grades may be impacted if a professor knew they had a psychological disability. One student reported, "My concern with all professors is that if I have a disability they're going to look for something to take off." For others, the symptoms of their disability interfere with asking for assistance, exemplified by the participant who reported that "sometimes the anxiety makes it hard to get up the guts and go ask to meet with somebody and talk about what's going on and the problem you're having."

Participants also described hesitancy to disclose to their friends and family as well. One student said, "I don't explain to my professors I have bipolar because of the stigma. But I don't like to with most of my friends either. In the past, some of my friends attribute my moods to bipolar…no, I'm just human." According to another participant:

> The thing about depression is most people don't look at it as a disability. There are people in my family I just don't talk to about it because they don't get it. They just can't comprehend that you can't put

> yourself in a state of mind because that's all they know. You can't expect the teacher to…they might be empathetic but they might not get it…they may have their biases.

Many participants felt attitudes regarding disability differ depending on the type of impairment and are concerned about negative attitudes and misinformation regarding psychological disabilities. Several have dual diagnoses and will discuss their other disability instead:

> I think people are more accepting of visible disabilities, something concrete. I wear a hearing aid, and everyone understands that. I told one professor I had depression, and she was like, "Everyone has problems," so I'm really careful about who I disclose to now.

When explaining this phenomenon, participants used words like "real," "concrete," and "actual" to describe how people view other types of disabilities, particularly visible disabilities or medical conditions. For example:

> I think it is more societal standards that drive that with the stigma. With migraines, there is a clear and distinct issue. Like I'll throw up and I can't concentrate. You can tell I don't feel good. With the depression, I've been battling the stigma with myself for a very long time and because a lot of people don't see it as something [pause], I don't know how to word this. So people don't see it as a real thing. There's definitely negativity because a lot of people don't understand it or try to understand it. They're like, "You're just sad." It's more than that; you're so far in the dumps you don't know what happiness feels like.

Other participants used examples such as a family member dying or having an injury. They were comfortable asking for an assignment extension or an excused absence because they felt the professors would understand:

> It's a little fear of stigma. It's very hard to explain. It's hard to go to a professor and say (pause), "Last semester I broke my leg and was late sometimes and had to move my seating" and they were really cool about it, but I can't imagine going up to a professor and saying I've changed my meds and am going to be a little flaky. They don't view it in the same way.

When asked why they sought assistance despite their concerns, all responded it was out of need or necessity. One student said, "I guess initially it was that I knew things were getting to the point I couldn't handle them anymore so I had to get help." Although the majority (n=12) of participants sought accommodations their first semester and asked for them in most of their classes, several waited to register with DSS until it "was almost too late," or there was "no choice" because of concern of failure. Indeed, a few participants stated they had dropped out of courses in the past or they were in danger of having to drop out of school:

> I mean the reason I sought help was fear of ruining my entire college career that one semester. Mind you, I don't think I did a medical withdraw, which I should have but I didn't know [about] it at the time. I wish I had, but it turned out being okay anyway. It was more like the emergency type situation, and it's the same with getting help for the mood disorder because I was at my breaking point….I do wait too long sometimes to seek out an appointment or seek out help because I'm worried people will think less of me. That's one problem I'm still working on…it's a self-stigma I guess, too.

Several participants also discussed self-stigma, either as an impediment to seeking out supports or as something they have "overcome" and have learned to "deal with." When asked how they were able to do this, they credited support from DSS, family or friends, and their own abilities and strengths. One student spoke to this issue by saying, "I just realized everyone has problems, mine have a different label… but I'm not worse or better than anyone else." Another participant stated, "I just had to get over my pride and accept I need help." Learning more about disabilities was helpful, too. According to one participant, "DSS was great with that. They helped me realize I'm not alone. Now I'm an advocate and will speak out when I hear misconceptions."

The participants' descriptions of their experiences seeking and utilizing assistance from DSS revealed several key categories to help explain the role and impact of these services on their academic achievement. Participants credited assistance provided by DSS, including accommodations, as integral to their academic achievement. However, they offered suggestions regarding how to further support students with psychological disabilities. They also discussed the challenges presented by disclosure and stigma and the need to overcome these concerns in order to receive the supports needed to achieve their academic goals.

Discussion

This study explored the experiences of college students with psychological disabilities utilizing accommodations and other supports provided by DSS to help them achieve their postsecondary educational goals. Although research indicates a high percentage of individuals with psychological disabilities drop out of their college programs (Salzer, 2012), the 16 participants in this study were enrolled full-time at a four year university and maintained a 2.5 GPA or higher. Six participants were seniors at the time of the interviews and were on schedule to graduate by the end of the academic year. The seven juniors stated they were on track to graduate the following year. Clearly, participants found ways to deal with the demands college students, with or without disabilities, experience. Perhaps more significantly, they were able to cope with the challenges presented by their psychological disability, such as managing their symptoms, finding and accessing appropriate supports, and dealing with stigma.

It is evident from the participants' narratives that accommodations and other assistance provided by DSS are essential to their academic achievement. Indeed, most, if not all, participants believe they would not be able to achieve their academic goals without these supports. Disability Support Services provides a wide variety of assistance participants deemed "necessary" for their academic achievement, including help with time management and organizational skills, advising, advocacy, and goal setting. The positive impact of knowing they were "not alone" was a salient theme throughout the interviews. Furthermore, accommodations such as the ability to take breaks during class, note taking and extended time on tests, and testing in a distraction free environment helped mitigate functional limitations students experienced due to their psychological disabilities. Findings from the current study are consistent with Kurth and Mellard's (2006) findings in their mixed method study, in which they conducted focus groups and surveys to examine accommodations used by college students with disabilities. The students they surveyed identified note takers and extended time on tests as the most effective accommodations they received in college, 87.5% and 85.7% respectively (Kurth & Mellard, 2006). However, results from their focus groups indicated mixed feelings regarding these accommodations, particularly note taking. These included problems with confidentiality, obtaining a note taker, and quality of the notes (Kurth & Mellard, 2006). These challenges were similar to the concerns expressed by participants in the current study.

It is important to note the cost/benefit relationship of seeking and receiving accommodations, including the risk of stigma and being treated differently by professors and other students. Maintaining confidentiality is a closely related issue, particularly in regard to the notification process and obtaining a note taker. Some professors breached university rules regarding confidentiality at times, causing the students to be embarrassed or feel uncomfortable. The fear of stigma may prohibit some from seeking assistance at all. A few participants in this study reported they waited until they were at risk of failing because of these concerns. Blacklock et al. (2003) noted five major barriers impacting the delivery of services and education to students with psychological disabilities: stereotypes and stigma, access to information and services, the complex nature of psychological disabilities, access to resources, and organization and institutional barriers. Of these barriers, stigma and negative stereotypes are perhaps the most frequently cited in the literature (Becker, Martin, Wajeeh, Ward, & Shern, 2002; Eudaly, 2002; Sharpe et al., 2004). Furthermore, according to Liebert (2010), "many students don't actually go to their professors until after they've taken their first exams and realized that they really do need accommodations to perform well in class" (p. 2). He further states these fears are not completely unfounded, as some faculty mistakenly believe individuals with psychological disabilities pose a risk to themselves and others (Liebert, 20120).

Even though students are not required to disclose the specific nature of their disability, some still feel hesitant to identify they have a disability because they are afraid their professors will think less of them or treat them differently. Some expressed concern they would be "found out" because their symptoms were noticeable. This may indicate some self-stigma and internalization of negative beliefs. Also, some felt it was necessary to disclose their specific disability in order for professors to understand their challenges. This disclosure was met with varying degrees of success.

Participants were able to recognize they needed supports and followed the necessary steps to receive accommodations. They sought, and continue to seek, assistance despite fears of stigma. Although some waited until the situation became "dire," they were still able to "overcome" their concerns and ask for assistance. Furthermore, most did seek services at the beginning or near the beginning of their college careers. There were also able to identify accommodations and supports that work for them and make suggestions regarding what other services could be beneficial to their success. These participants were registered with DSS and receiving accommodations, so they have been able to deal with their fears and concerns regarding stigma, at least to some degree. Throughout the interviews, it was evident the participants' desire to succeed and achieve their goals was a motivating factor in seeking assistance:

> I ask for help because I know I need help. I realized I don't need to be embarrassed about it because a lot of people have it [a psychological disability]. I think it's more about myself because the teacher doesn't encourage you. It's your choice [to ask for accommodations].

Others discussed wanting to do well and wanting to achieve their goals as chief motivators to asking for assistance. One student, for example, said, "If I want to graduate, I have to," and "I hate failure so I deal with it…I don't have a choice." This is consistent with Perry and Franklin's (2006) findings in their study examining the experiences of college students with AD/HD: "The drive to achieve along with the need for self-encouragement and motivation was an important strategy used by these students to continue their existence in college" (p. 106).

It is important to note the majority of participants received some sort of assistance in the K-12 setting; seven had either IEPs or Section 504 plans and four received accommodations informally at private schools. They knew the benefit of assistance, and many were encouraged by their teachers, counselors and case managers to seek accommodations in their postsecondary educational setting. Many also saw psychiatrists and/or therapists and the majority took prescription medication for their diagnosed disorder at one time or another. Therefore, they had documentation either through the school system or through a mental health professional. This may have made it easier for them to register with DSS and become eligible for accommodations. The required documentation can be expensive to obtain privately, and individuals in crisis may have difficulty finding the energy and motivation to procure the required documentation.

Implications for Practice

The participants' narratives indicate several implications for supporting college SWPD. Specifically, DSS providers may want to consider ways to encourage students with psychological disabilities to seek assistance. Disability Support Services clearly played a significant role for the participants in the study. However, college SWPD seek accommodations at a lower rate than peers with other disabilities. Accordingly, DSS providers should consider ways to identify and assist students with psychological disorders who do not have that history and familiarity with services. Perhaps more outreach during orientations, coordination with other student support services (e.g., counseling services, admissions office), as well as university-wide efforts to address stigma, would encourage students with psychological disabilities to seek assistance or accommodations. Also, DSS personnel may want to consider additional ways to facilitate diagnostic testing and the identification process, which is often expensive and can be overwhelming, particularly for individuals in crisis.

There is also a need for increased faculty awareness regarding the challenges and needs of SWPD. Faculty need to understand, if they do not already, that the vast majority of SWPD do not pose a threat to them or other students and have the ability to be successful and thrive in postsecondary educational settings when given the appropriate supports. It is also important for faculty and students to recognize psychological disabilities are "real" and students with these disabilities are not merely providing excuses when they have difficulties.

Universal Design for Instruction (UDI) can be an effective classroom strategy to enhance academic achievement for SWPD. UDI is an approach to teaching designed to maximize learning for all students, regardless of the presence of a disability, through the proactive use of inclusive instructional strategies and assessment methods (McGuire, Scott, & Shaw, 2003; Scott, McGuire, & Embry, 2002). Of particular relevance for this study is how UDI could address challenges involved with note taking and assessment accommodations, particularly in regards to stigma. It is also important to consider ways to increase faculty knowledge and use of the principles of UDI.

Further Research

There are several implications for further research. For example, it would be beneficial to explore the experiences of individuals with psychological disabilities attending postsecondary institutions who do not seek formal accommodations or other assistance from DSS. Specifically, what types of supports and services are they using? How are they coping with and managing the challenges presented by their disability? Do they seek accommodations informally, and if so, how do their professors respond? This could be done through a variety of research methods, including a mixed methods study involving a survey and individual interviews. It would also be helpful to survey a larger sample of individuals with psychological disabilities regarding the accommodations and supports they receive from DSS. This study explored the experiences of 16 individuals; surveying a larger sample may provide additional insight into the supports and services beneficial to college students with psychological disabilities. It would also be interesting to explore the perceptions of students with disabilities enrolled in classes where the instructor adheres to the principles of UDI (McGuire, Scott, & Shaw, 2003).

Conclusion

Barriers impacting educational experiences of students with psychological disabilities include stereotypes and stigma, access to information and services, the complex nature of psychological disabilities, access to resources, and organization and institutional barriers (Blacklock et al., 2003; Sharpe et al., 2004). However, the participants in this study were found to be working towards achieving their academic goals with vital supports provided by DSS, including accommodations. Without the benefit of these supports, most participants believed they would not be successful in their postsecondary pursuits. Despite some challenges regarding accommodations and concerns of stigma, accommodations mitigated the functional limitations presented by their disabilities. Furthermore, DSS provided additional supports such as goal setting, advocacy, and training in organizational and time management, which participants also deemed necessary for their success.

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